

City of Rocky Mount



Builder Express Program Application

Date: _____

Name: _____

Business Name: _____

Mailing Address: _____ City: _____

State: _____ Zip Code: _____

State License #: _____ Phone #: _____ Fax #: _____

Cell or other contact #: _____

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This form will be submitted to Customer Service and a representative will call you to schedule an appointment to establish your Builder Master Utility Account. For this appointment, we need you to appear in person.

Please be prepared to supply the following information when you meet with a Customer Service representative to set up your Builder Master Utility Account.

1. Average number of houses you expect to have under construction in a 12 month period.
2. Identification
3. Builder Master Utility Account Deposit (Check, cash, money order, etc.)

Please return the completed form to the City of Rocky Mount Inspection Services Division, One Government Plaza, P.O. Box 1180, Rocky Mount, NC 27801, or Fax to (252) 972-1590.